

Hold-Harmless Agreement

NAME: (PLEASE PRINT) _____
First Middle Last Maiden

Home Address: _____

Home Telephone Number: _____

Next of Kin: _____ Relationship: _____

I, the undersigned, hereby waive any claim for any injury against Santa Fe County and the Santa Fe County Sheriff's Department, any member of the staff, any of its employees or any trainee, which I may either directly or indirectly sustain as a result of my participation in any application process, training and instruction I will receive at the Santa Fe County Sheriff's Department or other locations selected for the giving of training or supervision. This agreement shall be binding upon the undersigned, his heirs and assignees.

Signature of Applicant: _____ Date: _____

STATE OF NEW MEXICO)
) SS.
COUNTY OF SANTA FE)

On this _____ day of _____, 1999, before me personally appeared _____, known to me to be the person whose name is subscribed to the above instrument and acknowledged the same to be his/her own free act and deed.

Notary Public: _____ My Commission Expires: _____